)									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003													
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)								MALL EI			OTHER SMALL		
TO	TAL CLAIMS		7	0				RATE	FEE		RATE	FEE	
FO	R	•	NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7 Q minus 20=		.)			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	7 mi	nus 3 =				X43=		OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT				+145=		OR	+290=			
* If the difference in column his less than zero, enter "0" in column 2										OR	TOTAL	770	
CVAIMS AS AMENDED - PART II / NOTE NOTE NOTE NOTE NOTE NOTE NOTE NOTE								SMALL	ENTITY	OR	OTHER SMALL		
d.	6/27/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	EST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.20	Minus	-á	b	-] ×	X\$ 9=		OR	X\$18=	$\Delta \angle$	
MEN	Independent	·a	Minus	14	?	-	1	X43=		OR	X86=	X_{\perp}	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						١	+145=		ОЯ	+290=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	Y	
7	25/05	/ (Cabana 4)		(Celu	mn 2)_	(Column 3		ADDII. PEE				•	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUIV PREVI	LEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 20	Minus	- /	20	- /]	X\$ 9=		OR	X\$18=		
MEN	Independent	. 2	Minus		3	-/_	:	X43= :		OR	X86=		
٩	FIRST PRESE	NTATION OF M	ILȚIPLE DEPENDENT		CLAIM []		+1	+145=		OR	+290=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	REST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	44		•		X\$ 9=		OR	X\$18=	·	
MEN	Independent	•	Minus	•*•		-		X43=	-	OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	·	
If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									· ·	OR	TOTAL ADDIT, FEE		
-	II the "Highest Nu	imber Previously P imber Previously Pa inber Previously Pa	aid For IN TH	19 SPACE	is less th	en 20, enter 2		ADDIT. FEE and in the ap		3.			
			•										

FORM PTO-875 (Rev. 10/03)